

2020 ANNUAL REPORT

VA HEROES FOR HEROES



VA



U.S. Department of Veterans Affairs

Veterans Health Administration
VA Northeast Ohio Healthcare System

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Cover image, pictured left to right: Vaccine Distribution Coordinator Brett Carroll, Pharm. D.; Chief, Infectious Diseases Dr. Usha Stiefel; Nurse Manager, Emergency Department Jose Rivera, RN; Community Living Center Nurse Fidelis Uzomah, RN; MICU/CICU Nurse Alice Muha, RN

Note: Some images were taken prior to current COVID-19 restrictions and mandates and may contain personnel without proper personal protective equipment.



WHAT WE DO

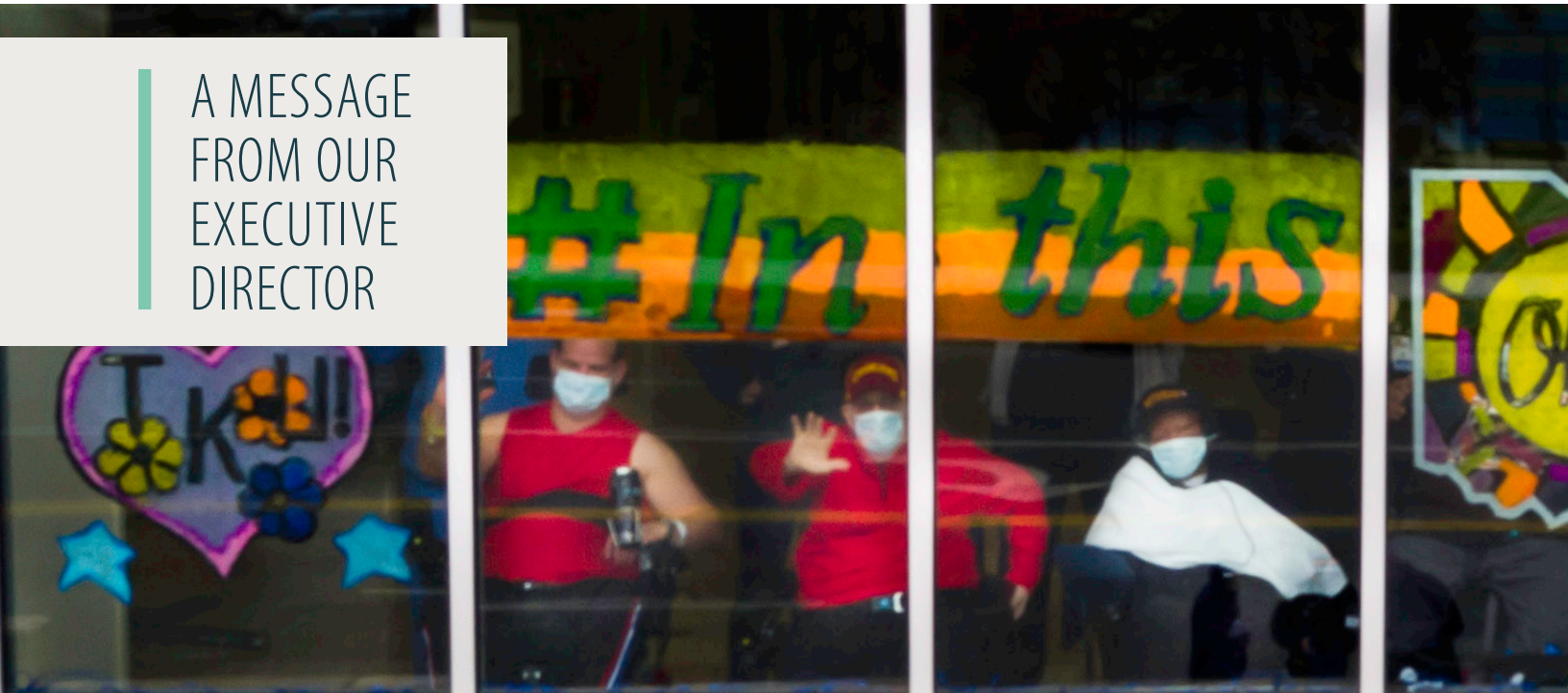
**VA Northeast Ohio Healthcare
System delivers high-quality, timely,
compassionate, Veteran-centric health
care to more than 111,500 Veterans
throughout Northeast Ohio.**

Veterans who choose VA can expect the very best care. VANEOLS consistently surpasses VA and private sector quality and satisfaction standards.

We offer a full range of primary, mental health, specialty, emergent care, medical education and research using state-of-the-art technology. Our Veterans are as diverse as the Northeast Ohio community. Depending on a Veteran's period of service, character of discharge, service-connected rating and income, he or she may be eligible for health care from VA. VA health care can also be used in combination with private insurance.

Veterans interested in exploring their eligibility for healthcare can contact VANEOLS's Outreach Coordinators at EnrollIVANEO@va.gov / 216-707-7914.

A MESSAGE FROM OUR EXECUTIVE DIRECTOR



JILL K. DIETRICH, JD, MBA, FACHE
EXECUTIVE DIRECTOR / CEO

I remember nearly a year ago, when we first heard about a potential threat called coronavirus. Our healthcare system took note as we have in the past, leaning on our emergency management and planning teams to prepare for the coming months.

What we couldn't have known at the time was that the COVID-19 pandemic would create a historic shift in healthcare operations for VA Northeast Ohio Healthcare System and the world. The rapidly changing landscape for disease management, readiness and responsiveness caused us to redefine how we provided care. Our healthcare system moved to a mostly virtual model almost overnight for outpatient care, focusing on both preventing the spread of the virus and ensuring VANEOMS could sustain essential inpatient services.

We were able to do this thanks to VANEOMS's history of strength across the three main Veterans Health Administration pillars: clinical care, education and research. We relied on our talented planners and strong relationships with outside physicians and researchers, both nationwide and in the Cleveland community. We used these resources to build a successful crisis response effort, pivoting quickly to save lives and leading the way for our VA region.



While the personal, professional and organizational toll of this pandemic is immeasurable, our response has been nothing short of amazing. Never before have I seen such a massive showing of strength, dedication and pure will as I have throughout this past year. The resilience of our team and Veterans will serve as an inspiration for years to come.

Early in the pandemic, we closed our residential units to visitors to protect our most vulnerable patients. A group hit particularly hard was our Long-Term Spinal Cord Injury Unit. These Veterans have no plan for discharge once admitted and expect to be with us for the rest of their lives. Our staff worked tirelessly to keep these Veterans connected to the outside world, including creative art projects like the

one pictured here. We hope to open to visitors soon, but in the meantime, we are inspired by these Veterans' spirits, and are reminded that we are all "In This Together."

Thank you to each and every one of you for your efforts, support and perseverance over the past year. We were finally able to begin fighting back with the arrival of our first COVID-19 vaccine doses in December, and I join you all in anticipating an end to this pandemic. That hope will sustain us in the year ahead as we continue to move forward together.

Sincerely,

About Jill Jill K. Dietrich became healthcare system Director in September 2019. Ms. Dietrich previously served as Director/CEO for the Dayton VA Medical Center. Prior to leading the Dayton VA, Ms. Dietrich served as Associate Director for VA Long Beach Healthcare System and was detailed to the Washington DC VA Medical Center. Ms. Dietrich also served Veterans at VA medical centers in: Lebanon, Pennsylvania; Columbus, Ohio; Chicago; Columbia,

South Carolina; Montgomery, Alabama; and Tuskegee, Alabama. She is a graduate of the Presidential Management Fellow (PMF) program, the VISN 10 Leadership Development Institute, the Healthcare Leadership Development Program (HCLDP), Leadership VA (LVA) and the Harvard University Senior Executive Fellows Program. Ms. Dietrich is a Fellow of the American College of Healthcare Executives (FACHE) and is board-certified in healthcare management.

LEADERSHIP

Leading the way
in excellence.



ANDREW D. PACYNA, FACHE
DEPUTY DIRECTOR / COO

Andrew D. Pacyna became Deputy Director in November 2015. Originally from Northeast Ohio, he returned to become the Associate Director of the healthcare system in 2014. Mr. Pacyna started his career with VA as a Graduate Health Administration Training Program (GHATP) Resident at the Syracuse VA Medical Center. After completing his training and first position at the Syracuse VA, Mr. Pacyna went on to hold positions with VA Maryland Health Care System and the Clement J. Zablockie VA Medical Center in Milwaukee. Mr. Pacyna also served as the Acting Medical Center Director for VA Ann Arbor Healthcare System in 2017 and Dayton VA Medical Center in 2019.



BETH A. LUMIA, MSW
ASSOCIATE DIRECTOR / COO

Beth A. Lumia became the Associate Director in July 2016. She came to Northeast Ohio from Bath VA Medical Center in New York where she was the Care Line Manager for the Medical Service and the Diagnostics and Therapeutics Service. Ms. Lumia served as the VA Care in the Community Program Manager as well. She started her career with VA in 2003 as a social worker, has accepted several national details in Washington, D.C., and served as the Acting Associate Director for the Erie VA Medical Center in Pennsylvania in 2013. Ms. Lumia served as the Acting Director for Chillicothe VA Medical Center in 2019, and currently leads VANEOSH's COVID-19 Incident Command.



BRIAN CMOLIK, MD, FACS
CHIEF OF STAFF / CMO

Dr. Brian Cmolik became Chief of Staff in October 2018. Dr. Cmolik has been part of the Cleveland VA Medical Staff since 1993, serving most recently as Chief of Surgery Service since 2013. He began his career with VA as a cardiothoracic surgeon and became Chief of Cardiothoracic Surgery in 2006. Dr. Cmolik completed his undergraduate education at Xavier University in Cincinnati, Ohio in 1979 and received his medical degree in 1985 from Northeastern Ohio Medical University. He is an Associate Professor of Surgery at Case Western Reserve University School of Medicine.



INETTE SARDUY, DNP, MPH, RN, NEA-BC
ASSOCIATE DIRECTOR, PATIENT CARE SERVICES, NURSE EXECUTIVE / CNO

Innette Sarduy became Associate Director of Patient Care Services in December 2012. Previously, she served for 12 years at the James A. Haley VA Medical Center in Tampa, Florida as the Chief Nurse for Acute Care. She holds an adjunct faculty appointment with Case Western Reserve University Francis Payne Bolton (FPB) School of Nursing and is the Chair of the FPB Chief Nursing Officer Advisory Council. Dr. Sarduy is also on the advisory council for Ursuline and Notre Dame Colleges' Schools of Nursing. She has a Bachelor of Science degree from Rush University in Chicago and a Master of Public Health Policy and Management from the University of South Florida in Tampa. She earned her Doctorate of Nursing Practice degree from the University of Miami in Coral Gables and is board certified as Nurse Executive, Advanced by the American Nurses Credentialing Center.



KRISTEN GUADALUPE, PHD, RN
ASSISTANT DIRECTOR, QUALITY, SAFETY + VALUE

Kristen A. Guadalupe joined VA Northeast Ohio Healthcare System in September 1994 and has been the Chief of Quality Management since June 2011, a role she previously held from 2005 to 2008. Dr. Guadalupe joined VA as a registered nurse and has served in multiple patient care and nurse leadership roles throughout her tenure to include Chief Nurse for Medicine Service. She is a graduate of Case Western Reserve University's Frances Payne Bolton School of Nursing, where she previously served as an Assistant Professor of Nursing.



TIMOTHY M. HEIMANN, PHARM.D., MBA
ASSISTANT DIRECTOR, COMMUNITY OUTPATIENT SERVICE + PHARMACY SERVICE

Timothy M. Heimann joined VA Northeast Ohio Healthcare System in August 2007, initially starting as a Pharmacy Student and eventually rising to become the Assistant Director of Community Outpatient Service and Pharmacy Service. In this role he is responsible for a pharmacy staff of 200 in addition to administrative operations for VANEOLS's VA outpatient clinics. Dr. Heimann is a member of the American College of Healthcare Executives, the Cleveland Society of Health-System Pharmacists, Ohio Society of Health-System Pharmacists, and the American Society of Health-Systems Pharmacy. He has a doctorate in pharmacy from Ohio Northern University and a master's degree in business administration from Indiana Wesleyan University.

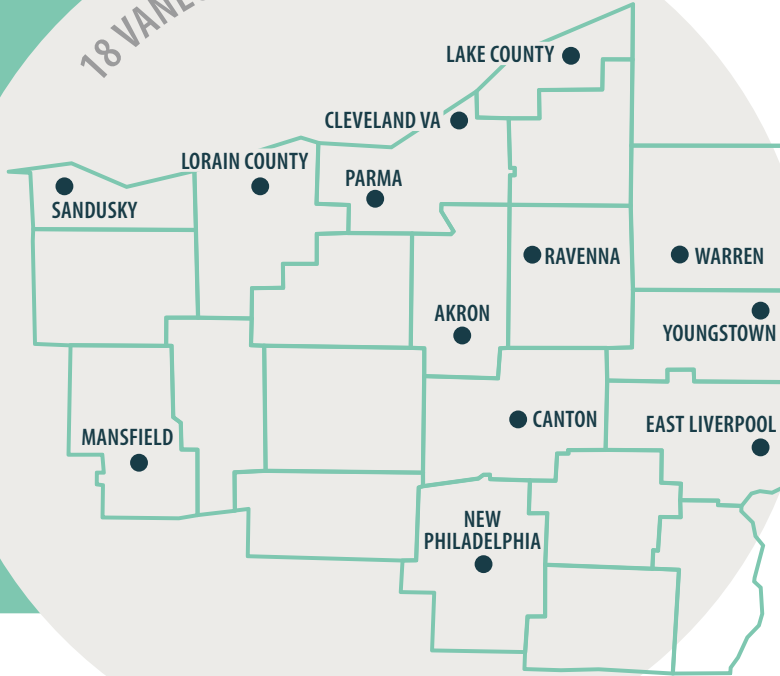


LOCATIONS OF CARE

Accessible for all.



18 VANEOS LOCATIONS



21 Counties
13 Outpatient Clinics
2 Resource + Referral Centers
1 Outpatient Surgery Center
1 Dialysis Center
1 Acute + Long-term Care Medical Center

AKRON 55 WEST WATERLOO ROAD, AKRON, OH 44319 • 330-724-7715

18,204 Veterans Served + 120 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Pharmacy • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

SPECIALTY SERVICES

Cardiology • Gastro-Intestinal (GI) • Hematology-Oncology • Dermatology • Urology • Rheumatology • Sleep + Prosthetic Equipment Diagnostics (Pulmonary Function Testing, ECHO Studies with contrast and bubbles, Vascular Lab)

CANTON 733 MARKET AVENUE, CANTON, OH 44702 • 330-489-4600

12,578 Veterans Served + 91 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Pharmacy • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

EAST LIVERPOOL 15655 STATE ROUTE 170, SUITE A, CALCUTTA, OH 43920 • 330-386-4303

3,561 Veterans Served + 28 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Podiatry • Primary Care • Women's Health • Homeless Programs

CLEVELAND

LOUIS STOKES CLEVELAND VA MEDICAL CENTER • 10701 EAST BOULEVARD
CLEVELAND, OH 44102 • 216-791-3800

97,381 Veterans Served + 4,412 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Pharmacy • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs • Specialty Services: All

LAKE COUNTY

35000 KAISER COURT, WILLOUGHBY, OH 44094 • 440-269-4600

7,529 Veterans Served + 68 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

LORAIN COUNTY

5255 NORTH ABBE ROAD, SHEFFIELD VILLAGE, OH 44035 • 440-934-9158

7,636 Veterans Served + 68 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Physical Therapy • Podiatry • Primary Care • Home Based Care • Women's Health • Homeless Programs

MANSFIELD

DAVID F. WINDER VA CLINIC • 1025 SOUTH TRIMBLE ROAD
MANSFIELD, OH 44906 • 419-529-4692

7,822 Veterans Served + 70 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

NEW PHILADELPHIA

1260 MONROE AVENUE, SUITE 1A, NEW PHILADELPHIA, OH 44663
330-602-5339

3,639 Veterans Served + 34 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Podiatry • Primary Care • Home Based Care • Women's Health • Homeless Programs

PARMA 8787 BROOKPARK ROAD, PARMA, OH 44129 • 216-739-7000

32,360 Veterans Served + 120 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Pharmacy • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

SPECIALTY SERVICES

Cardiology • Gastro-Intestinal (GI) • Hematology-Oncology • Dermatology • Urology • Rheumatology • Sleep + Prosthetic Equipment Diagnostics (Pulmonary Function Testing, ECHO Studies with contrast and bubbles, Vascular Lab)

RAVENNA 6751 NORTH CHESTNUT STREET, RAVENNA, OH 44266 • 330-296-3641

3,811 Veterans Served + 37 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

SANDUSKY FIRELANDS REGIONAL MEDICAL CENTER SOUTH CAMPUS 1912 HAYES AVENUE, SANDUSKY, OH 44870 • 419-609-1460

4,297 Veterans Served + 34 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Podiatry • Primary Care • Women's Health • Homeless Programs

WARREN 1460 TOD AVENUE, NW, WARREN, OH 44485 • 330-392-0311

4,738 Veterans Served + 38 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Podiatry • Primary Care • Women's Health • Homeless Programs

YOUNGSTOWN CARL NUNZIATO VA CLINIC • 1815 BELMONT AVENUE YOUNGSTOWN, OH 44504 • 330-740-9200

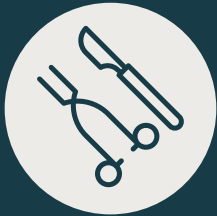
10,670 Veterans Served + 94 Employees

SERVICES

Dietetics • Laboratory • Optometry • Mental Health • Pharmacy • Physical Therapy • Podiatry • Primary Care • Radiology • Home Based Care • Women's Health • Homeless Programs

QUALITY SERVICE

Focusing on every individual need.



Surgery

Cardiothoracic
General
Gynecology
Neurosurgery
Ophthalmology
Optometry
Orthopedics
Otolaryngology
Plastics
Podiatry
Urology
Vascular



Rehabilitation Services

Acute + Long-Term Spinal Cord Injury Care
Audiology
Amputation Rehabilitation
Blind Rehabilitation
Creative Arts Therapy
Residential Treatment
Home-based Primary Care
Long Term Care / Skilled Nursing
Orthotics + Prosthetics Lab
Physical Medicine + Rehabilitation
Polytrauma Network Site
Recreation Therapy
Speech Pathology
Traumatic Brain Injury



Medicine

Cardiology
Dermatology
Dialysis
Endocrinology
Gastroenterology
Geriatrics
Hematology + Oncology
Infectious Diseases
Nephrology
Neurology
Nuclear Medicine
Pain Medicine
Primary Care
Pulmonary + Sleep
Radiation/Oncology
Radiology
Rheumatology
Women's Health



National + Regional Referral Services

Acute + Long-term Spinal Cord Injury Care

Amputee System of Care

Polytrauma Network Site

Amyotrophic Lateral Sclerosis (ALS)

Blind Rehabilitation Center

Cardiac Surgery

Cochlear Implants

Comprehensive Cancer Center

Comprehensive Rehabilitation Center

Fecal Microbiota Transplants

Gambling Disorders

General Surgery

Headache Center of Excellence

HIV Testing + Treatment

Multiple Sclerosis

Neurology

Ophthalmology

Pain Management

Parkinson's Disease

Polytrauma Care

Post-Traumatic Stress Disorders

Substance Abuse

Traumatic Brain Injury Care

Ventricular Assist Device



Mental Health

Addiction Recovery Center

Community Resource + Referral Centers

Homeless Services

Intensive Case Management

Military Sexual Trauma

Post-Traumatic Stress Disorder

Psychiatry

Psychology

Social Work

Suicide Prevention



Research Centers

Cleveland FES

Advanced Platform Technology

Case VA CARES



Virtual Health

Clinical Video + Home Telehealth

SCAN-ECHO

Mobile Health

My HealtheVet

Online Scheduling

VA Point of Service Kiosks

Video-to-Home

Virtual Care



Support Services

Clinical Chaplain Care

Dental

Food + Nutrition

Hospice

Fisher House

Imaging

Pathology + Lab

Pharmacy

Whole Health

ACTIVITY

Building blocks of VANEOHS.

VANEOHS is one of the largest VA healthcare systems and in Northeast Ohio. The daily and annual data points showcase the depth and breadth of VA's impact in Northeast Ohio.



Daily
Inpatient
Beds

597



Employees

5,497



Women
Veterans
Served

10,092



Veterans
Served

111,538



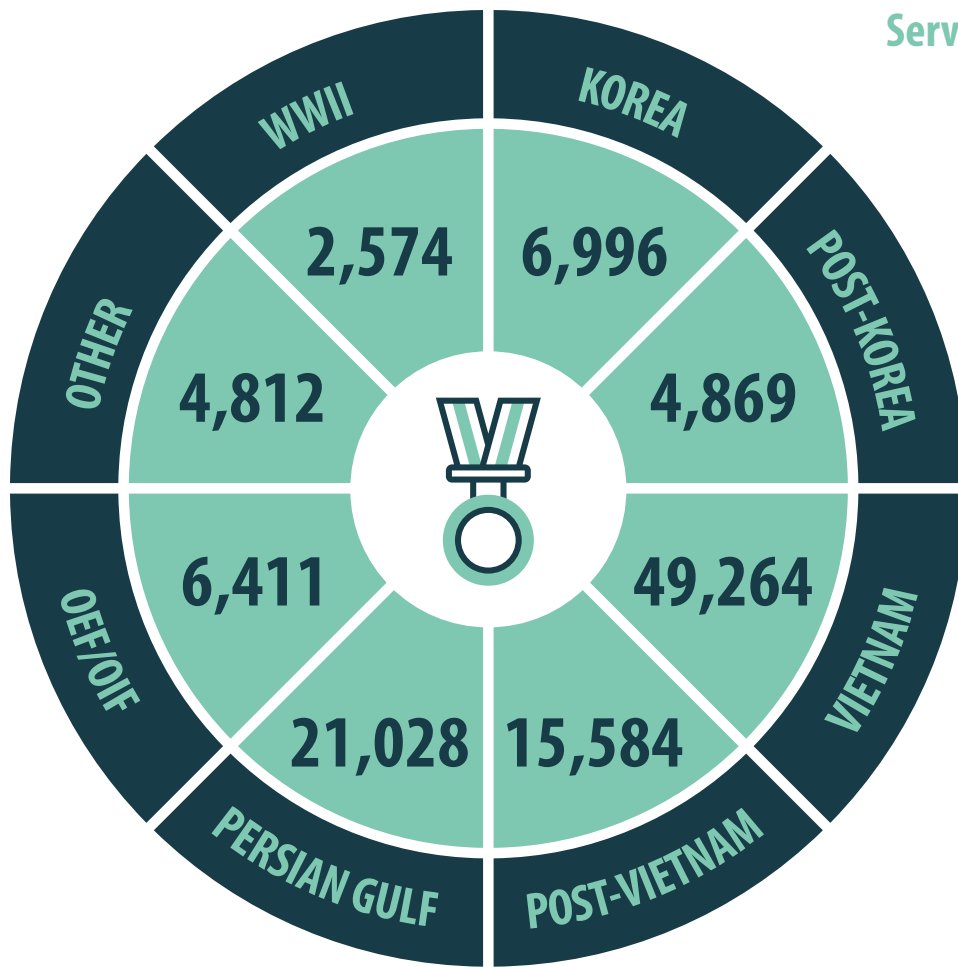
Primary
Care
Appts

382,500



Operating
Budget

\$1,261,897,894



Service Era Veterans Served.

VANEOHS cares for a wide demographic of our nation's heroes. The Vietnam era is currently the healthcare system's largest population of Veterans receiving care. VANEOHS is proud to continue the noble mission of serving those who have served.

DAILY + YEARLY

7,237	Outpatient Appointments	1,851,139
187	Home Care Visits	47,685
220	Telehealth Appointments	55,307
40	Admissions	10,314
4,351	Specialty	1,109,505
1,400	Meals Served	357,000
1,378	Mental Health	351,390
13,362	Prescriptions Filled	4,048,686

VOLUNTEERS + DONATIONS



The goodwill of benefactors and volunteers enhances the quality of life for Veterans by providing essential services and programs that aren't directly related to our Veterans' health care. VA is prohibited from fundraising but can accept gifts for the general benefit of the healthcare system and the Veterans we serve.

Services and programs funded through donations and supported by volunteers include transportation, social service assistance, rehabilitation support, recreation activities, homeless Veteran support, holiday gifts and Veteran outings.

Donors and volunteers can impact Veterans at the Cleveland VA Medical Center, our 12 VA outpatient clinics, and the Cleveland VA Fisher House. Donations are 100% tax deductible and go directly toward supporting Veterans.

60,668
Volunteer Hours

761
Volunteers

\$153,394
Monetary Donations

\$587,007
In-Kind Donations

Volunteer.


By giving your time, you can provide an immeasurable impact on Veterans' lives. Adult volunteers must be 18 years old. Youth volunteers must be at least 14 years old and can apply for several scholarships through their VA service. Volunteer applications require finger printing and background checks. We ask youth volunteers to commit to 60 hours and adult volunteers to commit to 100 hours per year. We also support unregistered group volunteers for special projects and events.

Donate.

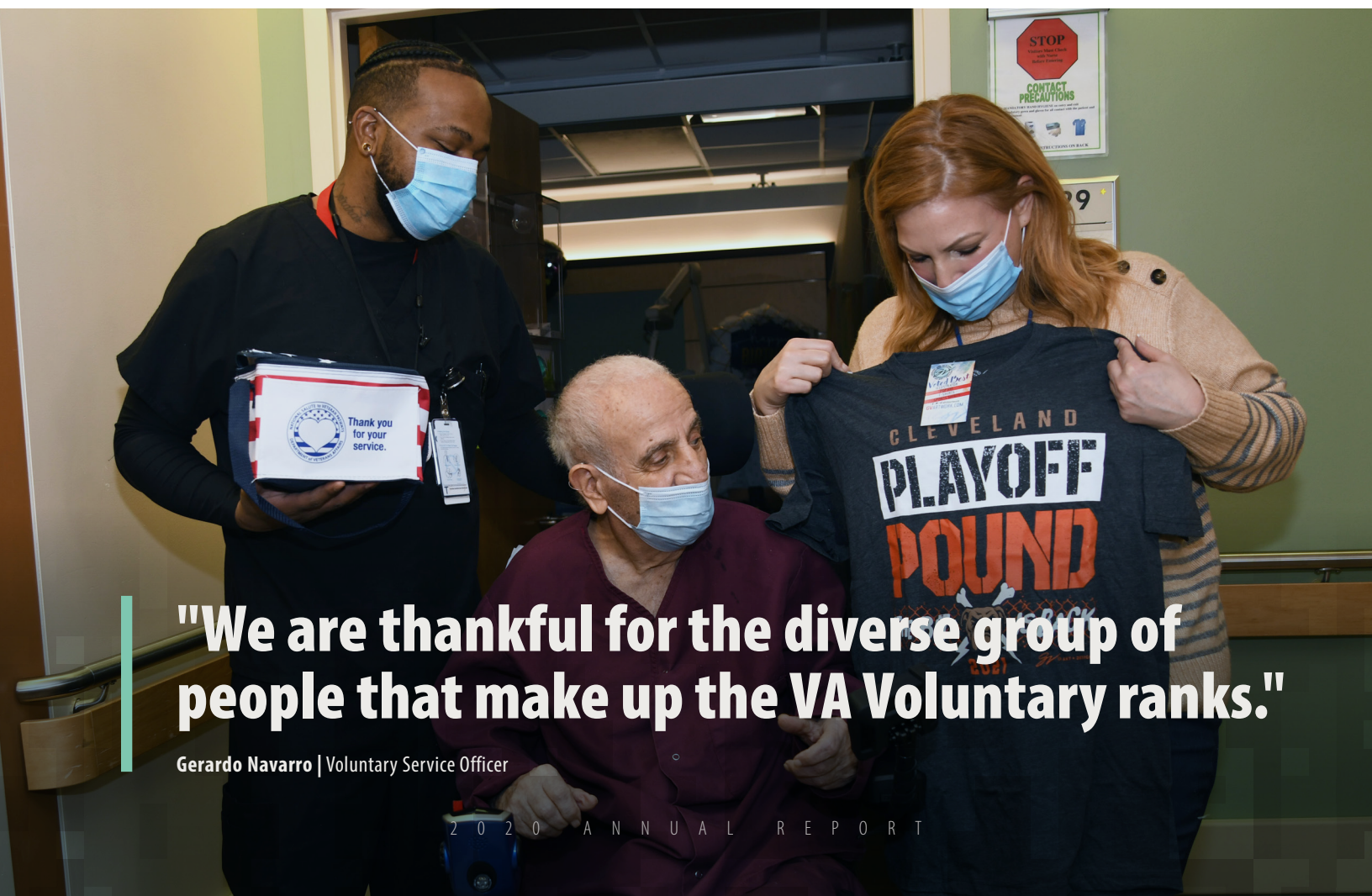
Monetary and non-monetary donations provide essential services and programs not otherwise available, such as transportation, social service assistance, rehabilitation equipment, recreation programs, activities, homeless Veteran services, holiday gifts, phone cards and much more. Organizations and individuals can also provide tickets for outings and sponsor events and activities for Veterans.

Get Started.

Contact the Voluntary
Service Department:

 216-791-3800, ext. 65110

 vhaclevoluntary@va.gov



"We are thankful for the diverse group of people that make up the VA Voluntary ranks."

Gerardo Navarro | Voluntary Service Officer



EDUCATION

The Department of Veterans Affairs views education as a pillar of VA Health Care. We work diligently to train a majority of healthcare providers across the nation. VANECHS works closely with local academic affiliates, providing training to thousands of students annually.

240

Affiliation Agreements

2,065

Students

VA Training Experience.

VA is invested in trainees' success with hands on experience in a diverse learning environment. Mentors provide clinical, teaching and research expertise, helping to guide trainees to their career aspirations.

Learn more about the VA trainee experience at cleveland.va.gov/internship/index.asp

Affiliations.

In Northeast Ohio, VA has strong collaborative partnerships with Case Western Reserve University School of Medicine, Cleveland Clinic Foundation, MetroHealth Medical Center, University Hospitals Cleveland Medical Center, the Frances Payne Bolton School of Nursing, The Breen School of Nursing – Ursuline College and VA's Office of Academic Affiliations. These collaborations help to prepare interprofessional learners to focus on patient-centered, team approaches to health care. **Our VA Center of Excellence in Primary Care Education is one of seven in the nation and ranks 1st in the overall mission of educating future providers.**



Together, we translate academic knowledge, neural technology, and clinical practice into hope and progress.

Photo courtesy of the FES Center



RESEARCH

We have numerous, large research and development programs. With strong programs in both basic and clinical science, scientists focus on seeking ways to understand and combat antibiotic resistant bacteria, cardiovascular disease, sleep disorders, vision loss, restoring function to Veterans with nerve damage, and much more.

\$15,994,236

Funding

253

Publications

Currently, more than 100 active research projects are being conducted in areas such as:

Autoimmune Disorders

Brain + TBI

Cardiology

Diabetes

Hematology / Oncology

Hypertension

Infectious Disease

Kidney Disease (Nephrology)

Multiple Sclerosis

Neurology

Nursing

Ophthalmology

Parkinson's Disease

Pulmonary Diseases

Rheumatology

Schizophrenia + other Psychiatric Disorders

Spinal Cord Injury

Stroke Rehabilitation

Urology



I AM HUMAN



CLEVELAND PREMIERE + PANEL DISCUSSION

1.30.2020 | 462 Registered Guests | Hannah Theatre at Playhouse Square

I AM HUMAN, a documentary which debuted at the 2019 Tribeca Film Festival in New York, examines the realities of neurotechnology. It chronicles three research participants with experimental implantable brain treatment. One of the participants was Cleveland Veteran, Bill Kochevar, who, in 2017, was the focal point of published *BrainGate2* research led by Case Western Reserve University, the Cleveland Functional Electrical Stimulation (FES) Center at the Louis Stokes Cleveland VA Medical Center and University Hospitals Cleveland Medical Center.

About the Film

Kochevar is believed to have been the first person with quadriplegia in the world to have arm and hand movements restored with the help of two temporarily

implanted technologies: A brain-computer interface with recording electrodes under his skull, and a functional electrical stimulation (FES) system activating his arm and hand, reconnect his brain to paralyzed muscles.

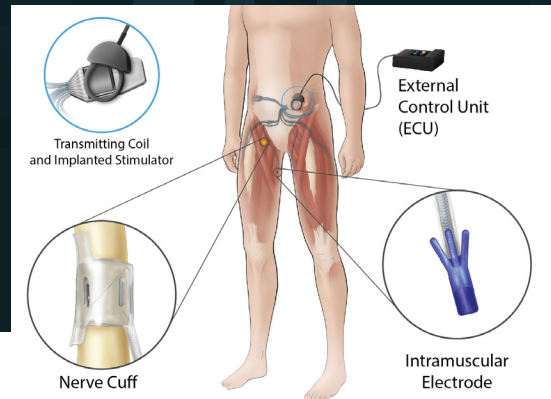
The Louis Stokes Cleveland VA Medical Center hosted a private viewing for Veterans the morning of the Cleveland Premiere, with an introduction by Co-producer Elena Gaby. A red-carpet reception kicked off the I AM HUMAN Cleveland premiere. A panel discussion moderated by *NPR Future You* Host Elise Hu with filmmakers Taryn Southern and Elena Gaby, and Cleveland FES Center researchers A Bolu Ajiboye, PhD; Robert F Kirsch, PhD; Jonathan Miller, MD; and Dustin Tyler, PhD followed the film. The evening concluded with a VIP meet-and-greet with the filmmakers, panelists, researchers, public officials, and other guests in the theater.



Left: NPR Future You Host Elise Hu and Co-producer Elena Gaby on the red carpet.

Right: Panel discussion moderated by Elise Hu, with filmmakers Taryn Southern and Elena Gaby, and Cleveland FES Center researchers A Bolu Ajiboye, PhD; Robert F Kirsch, PhD; Jonathan Miller, MD; and Dustin Tyler, PhD.

Veterans' private viewing at the Louis Stokes Cleveland VA Medical Center.



The Advanced Platform Technology Center competed in the 2020 Cybathlon, a competition held every four years where individuals with disabilities use robotic assistive aids to complete tasks. Team Cleveland is comprised of pilot Mark Muhn with researchers and staff from the Louis Stokes Cleveland VA Medical Center (APT Center) and Case Western Reserve University. In 2016, Mark and the team took home the gold in the Functional Electrical Stimulation Bike Race. In this race, pilots with complete spinal cord injuries are equipped with neural stimulation systems that enable them to pedal a cycling device.

Muhn's implanted system was developed by researchers at the Louis Stokes Cleveland VA Medical Center and Case Western Reserve University. This technology was initially created to help individuals with paralysis stand up, take a few steps, and improve seated stability. The system uses a surgically implanted stimulator just below the skin and electrodes that wrap around a nerve or inserted near the nerves. Similar in function to a cardiac pacemaker, but in this case the muscles that move the legs and trunk contract instead of the heart. The impulse of small electrical current is controlled by the external control box and can be used to coordinate the actions of multiple muscles at one time.

Due to COVID-19 restrictions, the event was entirely virtual. On November 12, Mark completed three races which were 450 meters longer than his race four years ago. His times were consistently around 3 minutes, 13 seconds and his races were monitored, recorded and sent to the organizers in Zurich, Switzerland. The rides of all nine teams were shown in a livestream on November 13, featuring the top four teams

in a "head-to-head" competition. Mark and Team Cleveland competed in the finale and took home third place. While Mark may not have won first place, his work and the efforts of the entire team over the years have benefited many Veterans and individuals with mobility issues.

Since the 2016 Cybathlon, the APT Center has researched new ways to use the Implanted Neural Stimulation System for individuals with spinal cord injuries, multiple sclerosis, or other neurological conditions to exercise with activities, such as biking and rowing. Individuals with these conditions tend to be more susceptible to secondary health problems such as weight gain, poor blood flow, and depression due to the inability to move their legs and use their muscles to exercise.

The technology was also adapted for a remote environment due to the pandemic. New equipment was sent to some of the implant recipients to be used with their adapted home trikes. This allowed researchers to continue data collection, track participant progress, and stimulation patterns. The team also used an online virtual biking program called Zwift, which allowed everyone to virtually ride with each other, promoting a sense of community during quarantine while also encouraging exercise.

In the coming months, with support from the Craig H. Neilsen Foundation and VHA Innovators Network, the APT Center is expanding the cycling program using surface stimulation for those without implanted systems to other sites including Buckeye Wellness Center, Craig Hospital, Pittsburgh VA Medical Center, and James J. Peters Bronx VA Medical Center.



CREATING A NEW NORMAL

VA Northeast Ohio tackles COVID-19.

The storm was coming. It had ravaged China and Italy, and now COVID-19 was rapidly making its way across the United States, bringing major hospitals to their knees, and killing the elderly at an alarming rate.

VANEOHS officials knew it was only a matter of time until the deadly coronavirus claimed one of their own. Even as they began preparing, they braced themselves for the worst.

“Our population skews to older veterans,” said Dr. Todd Smith, the hospital’s deputy chief of staff and an internist. They have “multiple comorbidities and a lot of different illnesses. Our first thoughts were how can we mitigate the risk?”

Smith and Beth Lumia, MSW, VANECHS’s associate director, set up an incident command the first week of March and began working through every contingency they thought the health care system might face. Other health systems had run out of ventilators and other supplies. Rumors circulated that doctors were being forced to decide who would live and who would die. VANECHS was determined to not be caught off guard.

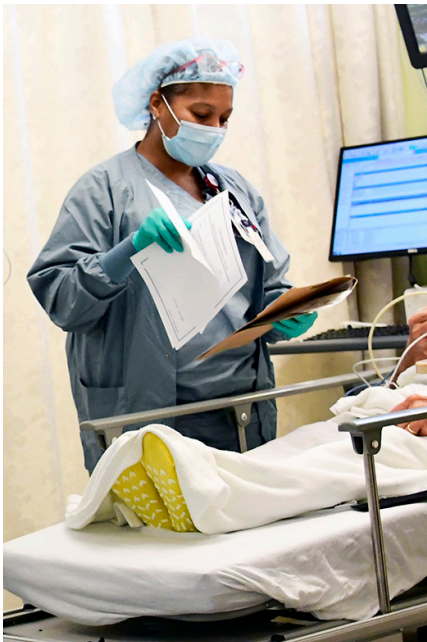
“It all boiled down to, ‘Are we going to have enough resources at the right time and in the right place to take care of veterans?’” said Lumia.

The call came March 15, 2020, in the wee hours of the morning: The Cleveland VA had its first positive patient.

“We all had the visceral reaction of, OK, this is happening,” Smith remembered. “It was important work. It needed to be coordinated 24 hours a day. It was a very intense time.”

At first, they didn’t know if they would have to isolate staff members, recalled Jeff Rusnak, chief of the Patient Transfer Center, but as much of the country scrambled to find personal protective equipment for medical workers, the Cleveland VA had a stockpile of powered air purifying respirators (PAPRs). There weren’t enough disposable gowns, but they did have washable ones.

COVID tests were a different story, said Smith, but scientists at the Cleveland VA were soon developing their own tests.



“There’s not a single one of us who hasn’t been impacted by it. Our way of life has changed, hopefully not forever.”

“We did amazing work with [testing]. The Cleveland VA is an academic medical center. We teach and we have researchers. We had good logistics contacts within different companies that made machines. We ended up with four [testing] platforms.” Between them, he said, “we were able to piece together the testing that we needed.”

VA also relied on community partners like the Cleveland Clinic, University Hospitals and MetroHealth to increase testing capacity: “We were able to leverage the academic community that we’re a part of in Cleveland, as well as leverage a lot of the in-house expertise that we have in testing and research, laboratory work and laboratory operations,” Smith continued.

It was always something. If it wasn’t the tests, it was the swabs to perform the tests. At one point, Smith said, staff members checked every room to count how many swabs they had left.

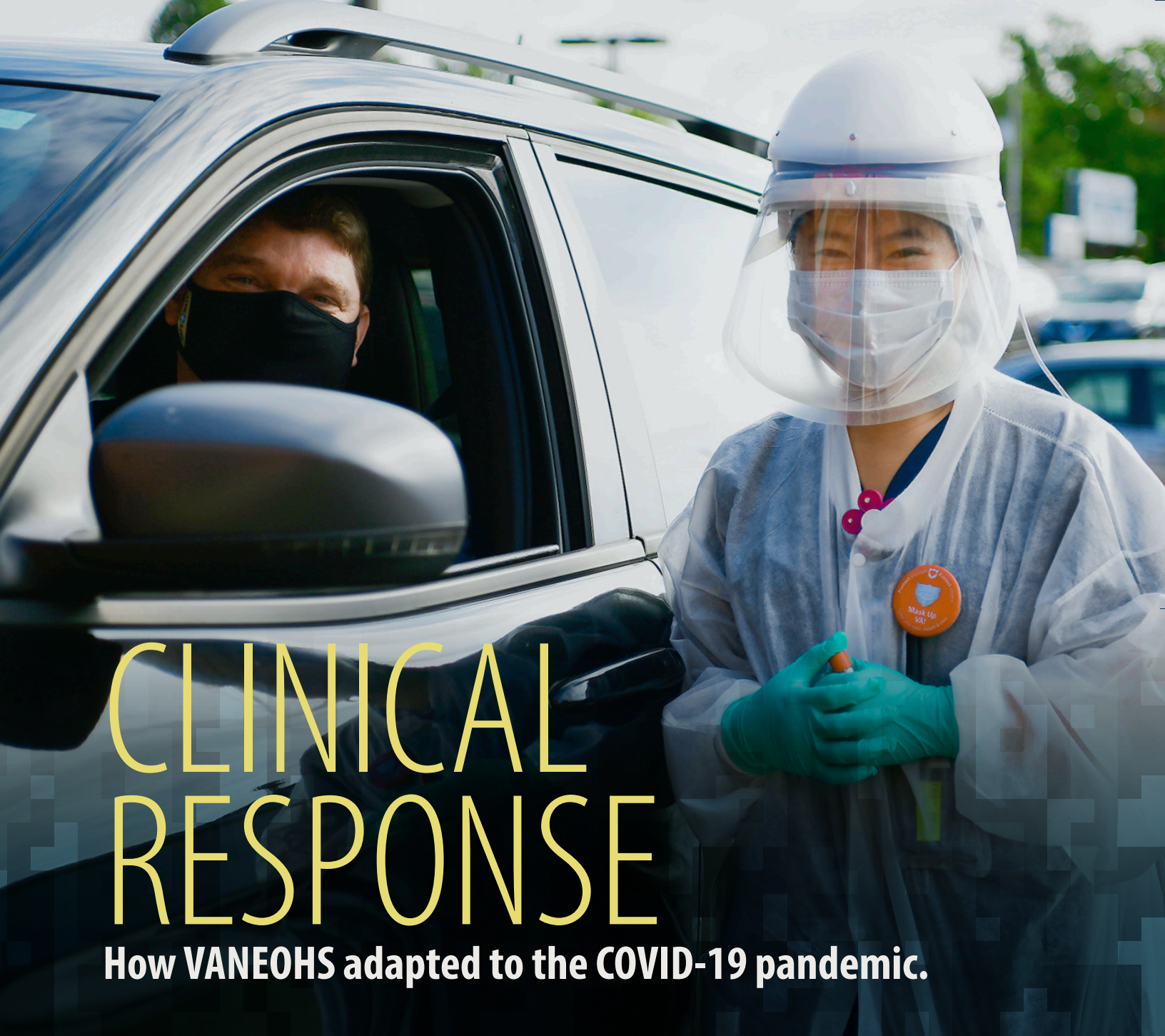
Hospital staff also developed detailed plans for increasing COVID patient capacity. Regular patients would be moved from the medical ICU to the surgical ICU, for example, and the MICU would be reserved for COVID patients. The engineering department converted regular hospital rooms to negative

pressure rooms. A new education program would train nurses, preparing acute care nurses to serve in the ICU, and training ambulatory care nurses to take their places on the acute wards.

Preparation helped ensure they never ran out of space. “We would meet with the different services,” said Rusnak, who oversees all movement of patients in, out and within the hospital. “We would tell them what we’re seeing, what’s happening, and what the plan is. Every day was changing.”

“People did amazing things, from standing things up that would typically take months in 12 or 24 hours, or just working hour after hour after hour,” said Smith, noting that the regular business of the hospital didn’t stop because of COVID. Veterans still had heart attacks and they still developed cancer. After almost a year, everyone is stretched thin.

“Morale is always a concern,” said Lumia. “Even if you didn’t have COVID, there’s not a single one of us who hasn’t been impacted by it. Our way of life has changed, hopefully not forever.”



March 15, 2020 is a date doctors and nurses at the Louis Stokes Cleveland VA Medical Center will remember forever. That was the day a global pandemic arrived on their doorstep when an elderly man with dementia tested positive for COVID-19.

"Even though you know it's coming and you're developing treatment algorithms and infection control protocols, I think a small part of you hopes that it's not actually going to come to your hospital," said Dr. Usha Stiefel, Chief of Infectious Diseases.

At first, said Dr. Charles LoPresti, section chief of acute care medicine, physicians looked for fevers, for chills, for typical upper respiratory symptoms, such as coughs or shortness of breath. But they soon found that positive patients could also present with just headaches or nausea/vomiting.

In the beginning, LoPresti said, doctors didn't know much about the disease, but they did know COVID patients could deteriorate rapidly.

"I don't know how many times I've had a patient about to be discharged when they crashed and ended up in the ICU," said Dr. Sarah Augustine, Associate Chief of Medicine Service.

The Medical Intensive Care Unit was initially reserved for COVID patients. Patients who weren't quite as sick, or who had started to get better, went to the Progressive Care Unit.

"It was extremely stressful," said Holly Robinson, PCU nurse manager, but "our nursing kicked in. We're going to take care of the patients."

Amid a nationwide personal protection equipment shortage, the Cleveland VA was lucky. It had extra powered air purifying respirators (PAPRs) on hand.

"We were asked to conserve, [but] we never felt that we did not have enough" said Lisa Neelon, MICU nurse manager. "My goal was to make sure the staff felt safe."

Everyone was afraid to bring COVID home – Robinson slept in a different room from her immunocompromised husband – so the hospital provided scrubs medical staff could change into at work and showers they could use before going home. No one from either the MICU or the PCU became infected with COVID at the hospital.

After almost a year, doctors and nurses have learned how to treat the virus, and the death rate has gone down. Veterans no longer go on ventilators right away; it's too hard to take them off, said Augustine. Instead, patients receive high-flow

oxygen first. Similarly, drugs initially touted as lifesavers were soon discarded as ineffective and potentially harmful. They've been replaced by the steroid dexamethasone and the antiviral remdesivir. Most patients also receive blood thinners.

Nurses have learned to check lab results that normally wouldn't matter for respiratory illnesses, said Robinson, and they quickly discovered that a normal pulse oximeter reading of, say, 98 percent, wasn't necessarily accurate. Veterans' oxygen levels might really be 66 percent. "That's not something that you're presented with in nursing school."

Practitioners from throughout the Cleveland VA and other, nearby institutions – the Cleveland Clinic, University Hospital, MetroHealth – would call and text each other at all hours to pass on such odd results.

"We all became a lot closer – physically distanced, but mentally closer – to our colleagues," said Stiefel. "We were all in constant contact. There was obviously very minimal data." Studies were released early, before peer review, so physicians could learn from each other in real time.

One problem still proved nearly impossible to solve: "Patients who are alert feel trapped," said Robinson. "We've had delirium set in" after months of isolation.

Nurses, social workers and clinical psychologists might read texts from a Veteran's children. They might show a patient family photos. They might set up a tablet for video chats.

However, "it is not the same," said Augustine. "I'm not sure it's possible to realize how awful the isolation is. Worse is having to withdraw support when you haven't been able to visit your loved one. It's devastating." (The Cleveland VA recently began allowing 15-minute terminal visitations for COVID positive patients with appropriate PPE.)

When patients do recover, "it is a wonderful feeling," said Neelon. "When we sent our sickest patient out it was just a beautiful moment."

Those happy moments have sustained frontline workers for the past year. They're important because, even with vaccines, COVID isn't disappearing anytime soon, said LoPresti.

"This was an all-hands-on-deck response, and we needed everybody," he said. "I could not be happier with the willingness that I saw from everybody in terms of being flexible with rapidly changing protocols and uncertainty and personal anxiety around health so many stressors, so many reasons to not do your job well. The VA just shined through."



Patty James stood in the emergency room of the Louis Stokes Cleveland VA Medical Center, March 23, 2020, trying to keep her composure as nurses wheeled her husband, David, to the back. She had rushed him to the hospital after finding him barely conscious, confused and burning with fever. She wouldn't see him again for a month, a month in which he almost died several times.

The couple wasn't too concerned when David first started showing cold symptoms a week earlier. He drives a school bus to keep busy in retirement and colds are part of the territory.

But David, who has diabetes and 10 stents in his heart, now had a fever of 103 and was disoriented. Patty, a cardiac monitor technician, realized his symptoms matched COVID-19. She was terrified. To make matters worse, she had to go into quarantine herself. She couldn't stay with her husband. She couldn't see the family she needed for support. (Patty never got sick.)

"It was hard to process," she recalled, "especially the next morning when they told me he was positive for

we'd be rotating shifts and be able to talk to the doctors in person instead of them video chatting with us and showing him lying there. Sometimes he would flutter an eye when we got to talk to him."

But Patty was right: David wasn't ready to go. After 17 days, he became the hospital's first COVID patient to be successfully taken off a ventilator.

"I could breathe again," cried Patty, crediting the ICU nurses. They "were unreal, so caring."

The hospital remains a hazy blur for David. His first memory is of trying to stand. "They had me in one of those cradles, and they put my feet on the floor. I just collapsed." He had lost some 50 pounds and couldn't walk. He needed oxygen and physical therapy.

David had a birthday in the hospital, and staff surprised their "miracle" patient with a party, complete with cake and orange sherbet, and his family joining in via video screen. They even gave him the perfect present: He was going home soon.

"I tell people, 'You've got to try the VA.' The VA in northeast Ohio is the greatest."

COVID." Then came even more devastating news: David was going downhill fast and would need to be put on a ventilator. Doctors asked Patty if she would consider a do-not-resuscitate order.

No, absolutely not, Patty said. Her husband had a lot of life left to live. She rushed back to the hospital and, unable to visit David – VA was closed to visitors – she sat in her car for hours. Nurses set up a brief video feed, and doctors asked to try experimental medications.

Over the next couple of weeks, David battled COVID-19 and pneumonia. His blood pressure dropped repeatedly. He had a minor heart attack. Doctors tried taking him off the ventilator with dismal results. No one thought he was going to make it.

It was "hell," Patty said. "He was there. I was here."

"You just felt really helpless," added David's son, Daniel James, who was stuck in Florida. "In a normal situation,

"He pushed his walker out of the way at one point and showed us that he could take steps, that he was walking," said Daniel. "He was laughing. He was joking. You know, he was back. It was just amazing."

VA staff lined the halls to cheer David on his way. His motorcycle club met him along the road, and a police officer friend gave him an escort, sirens blazing. Kids and grandkids waited outside his house. (The couple has a blended family of five children and eight grandchildren.)

David had a long way to go in his recovery, but he was "ecstatic" to be home. He still suffers from occasional confusion and nightmares. He still needs an inhaler four times a day. But thanks to the VA, he's alive. He met his new great-granddaughter. He walks several miles every day. He drives his school bus.

"If I had gone to another hospital, I'd have been dead," he said. "I tell people, 'You've got to try the VA.' The VA in northeast Ohio is the greatest."

VIRTUAL CARE

VA leads movement in response to COVID-19.

Last March, as COVID-19 began to ravage the country, staff throughout VA Northeast Ohio Healthcare System faced the biggest challenge of their careers. They knew their elderly patients might be hit hard by the disease. But while they temporarily shut down outpatient clinics and planned for worst-case scenarios like running out of ventilators, they knew that they couldn't discontinue routine care. Veterans depended on them.

So doctors, nurses and administrators turned to the VA's Video Connect program. They overhauled the VA Northeast Ohio Healthcare System practically overnight, transforming it into an organization that provided many day-to-day services virtually.

Staff worked around the clock to set up computers and tablets, and to teach more than 115,000 employees

diabetes or hypertension or sleep apnea are generally good candidates. "Making sure that they're taking their medications and their blood pressure is controlled—those are easier to do via video. Of course, if somebody says 'I have chest pain' they have to come in."

Patients don't have to spend hours driving to doctors' appointments when using VA Video Connect. It keeps high-risk veterans home more. Relatives can be more involved in care decisions. (A provider can conference in a third party, such as a spouse or a child.)

Elderly patients, many of whom weren't tech savvy, were a particular concern in the transition, but VA did everything possible to provide support and access. For example, the telehealth team processed 4,744 test calls with patients.

"This made a lot of people really reconsider how they provide healthcare."

and veterans how to access virtual visits, according to David Chmielewski, chief of the hospital's Community Outpatient Service.

Virtual appointments increased 2,816 percent over the previous year, according to the telehealth team. Between March and December, there were 50,771 virtual visits, and 23,425 patients used the service for the first time.

"It was staggering," said Chmielewski.

"You can do a lot of chronic care management," explained Dr. Corinna Falck-Ytter, associate chief of staff for primary care. Patients who are stable but may have

"People were going to church virtually," said Chmielewski, explaining that many Veterans became more comfortable with video chatting as the pandemic progressed. "It wasn't a foreign language anymore. You could say something like, 'Do you Zoom with your grandchildren?'"

The VA even loaned preprogrammed devices, complete with cellular network plans, to patients who didn't have any other way to connect.

Veterans can also visit local clinics and connect virtually with specialists who might be located an hour or more away. Nurses take the patients' vital signs, and will notice if something is wrong, Chmielewski said.



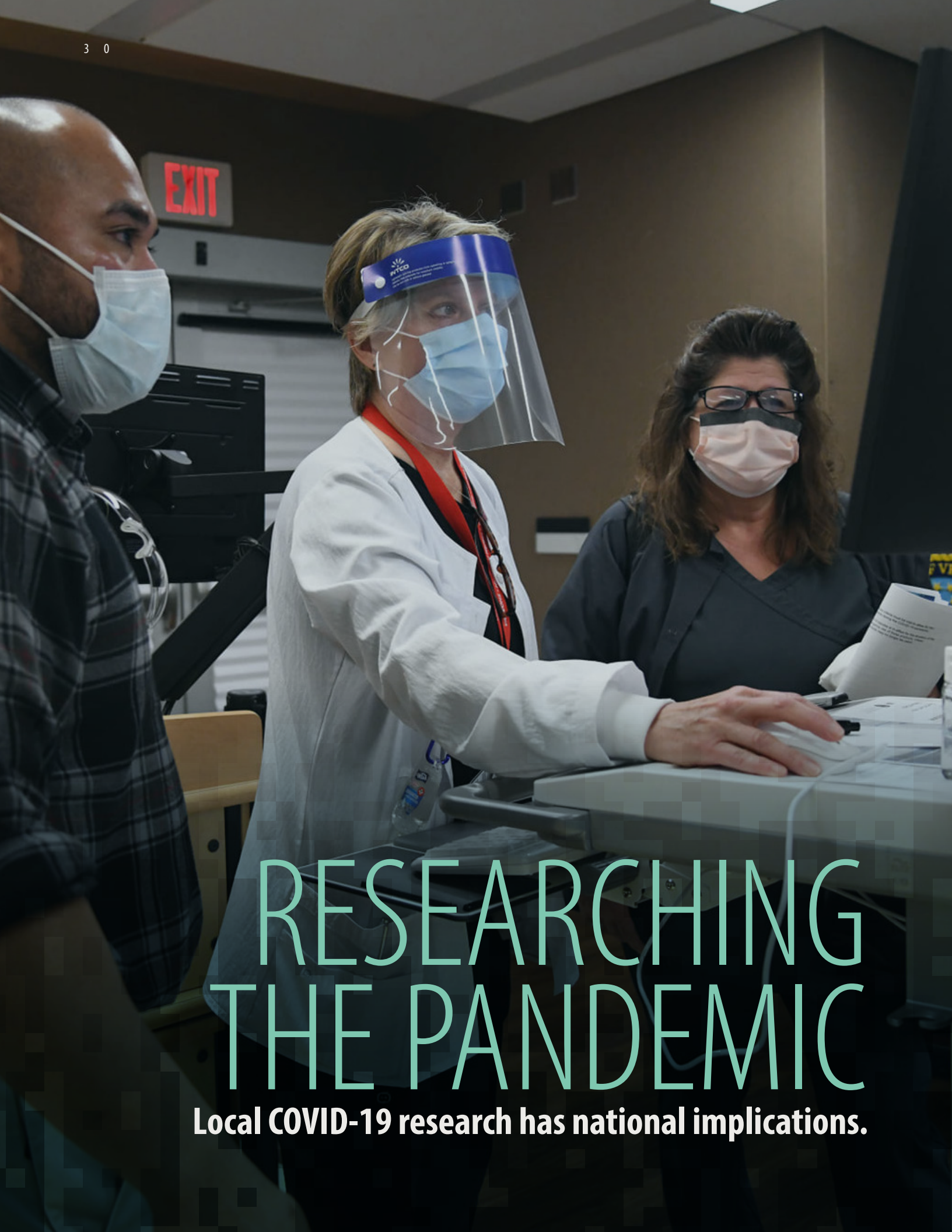
If necessary, providers can conduct appointments over the phone, although it's not as effective, said George Kasidonis Jr., a clinical social worker who received an award for carrying out the most virtual visits in the VA. On a video call, "you get to read body language and facial expressions." If someone is in crisis, he can send emergency help via VA Video Connect.

Providers can also share their screens and resources with patients. They can glimpse patients' home lives.

"I routinely tell my patients to [check their] blood pressure while online. I can watch them do it, see if their technique is acceptable, and I have immediate data," said Falck-Ytter.

Virtual visits, said Rachael Oberlander, facility telehealth coordinator, have "nowhere to go other than up," even after the pandemic tapers off. Patients that "like it, are going to continue to use it. As we see new generations, we'll also see more tech savvy users demanding virtual visits."

"This made a lot of people really reconsider how they provide health care," added Chmielewski. "We can cut [in-person] visits down from every three months to maybe once a year or every two years. Nobody ever wants a global pandemic to hit, but it did really take the health care industry and flip it upside down."



RESEARCHING THE PANDEMIC

Local COVID-19 research has national implications.

Scientists and researchers have long believed that the world was overdue for another pandemic like the 1918 Spanish flu outbreak that killed millions. Still, many were caught off guard at just how rapidly COVID-19 began spreading in early 2020.

Infectious disease physicians and other experts at the Louis Stokes Cleveland VA Medical Center followed news stories and scientific studies carefully. All too soon, they were conducting their own research.

“Infectious disease has been a really strong discipline in our VA,” said Dr. Robert A. Bonomo, an infectious disease specialist and associate chief of staff for academic affairs at the hospital. “Where should our research priorities be reconfigured as a result of COVID? What were the important studies to get out there quickly?”

Bonomo served on the steering committee for VA CURES, which is the VA’s national response to COVID, reviewing research applications and prioritizing “the biomedical efforts to combat the virus.”

Locally, he said, doctors are examining the immunology of COVID infections, including how long antibodies will last after a vaccine, “which is very, very relevant. We want to know how long we’re going to be protected.”

The hospital’s research program is so well respected nationwide that it was the only VA medical center invited to participate in the Pfizer vaccine trial, which kicked off with historic speed in May. About 62 Veterans and employees volunteered.

“Within like a week of having the RNA sequence of the virus, [Pfizer was] able to design a vaccine,” said Dr. Curtis Donskey, an infectious disease specialist and chair of the hospital’s Infection Control Committee. “They were ready to start doing trials about two to three months [later]. That’s never really been accomplished before.”

“We were thrilled to be asked,” he continued. “We want Veterans to be involved in these types of trials. It gives us some assurance that the vaccine works well in our population. The trial helped us be very well prepared to implement the vaccine.” They already knew how to give it, handle it. They already had one of the special freezers to store it at negative 70 degrees.

While VA researchers work to eradicate COVID with the vaccine, they’re also helping develop treatment protocols and guidelines.

VANEHOS’ Chief of Gastroenterology and Hepatology, Dr. Yngve Falck-Ytter, helped author the Infectious Disease Society of America’s “Guidelines on the Treatment and Management of Patients with COVID.” His work with IDSA was instrumental in stopping the use of hydroxychloroquine as a therapy for COVID. There are, he said, no studies that show that it helps, whereas it can have serious side effects like heart arrhythmias.

“Luckily, people read our guidelines and the use plummeted,” he said. Nationally, VA became one of the first health care systems to advise against its use.

VA’s goal was not only to heal COVID-stricken Veterans, but also to protect staff. The hospital managed to provide enough personal protective equipment in spite of a nationwide shortage.

“There was a concern that people would be working under hazardous conditions,” said Donskey. However, it soon seemed like the COVID ward was the safest place in the hospital because everyone was so careful.

A study confirmed it: No employee on the COVID ward or in the ICU had a high-risk exposure at work for seven months, and risk decreased over time as doctors learned more about the disease, Donskey said.

For example, fist bumps have long been thought to be safer than shaking hands. Donskey put that to the test. After touching keyboards contaminated with a benign virus, volunteers exchanged both greetings. Both transmitted the virus. “We would recommend using an elbow bump or avoiding any contact greeting,” Donskey said.

He also studied different types of disinfectants. Both steam and ultraviolet light proved to be extremely effective at eradicating viruses, he said – especially steam. After hearing that rice cookers are routinely used to decontaminate masks in Asia, Donskey and his team decided to experiment. Rice cookers turned out to be excellent sterilizers.

Throughout the pandemic, Bonomo said, such research has been key, but so is flexibility.

“I’m very proud to say that the VA has an emerging infectious diseases network,” he said. “You can’t anticipate everything, but you can develop systems to help you pivot fast. Supporting research programs that anticipate significant challenges to our health care system is very, very important to mitigating pandemics.”

HOPE ON THE HORIZON

COVID-19 vaccines are delivered to VANECHS.

The year 2020, the year of the pandemic, ended on a hopeful note: More than one vaccine had proved effective against COVID-19. While this was welcome news to VA Northeast Ohio Healthcare System officials, it wasn't a total surprise. The hospital was the only VA healthcare facility to participate in Pfizer's vaccine trial, and was ready to begin vaccinations the day after receiving its first shipment.

The vaccine's development was rapid not only because much of the world's scientific community focused on it, but because of the type of vaccine itself.

RNA vaccines can be produced and adjusted rapidly, explained Brett Carroll, a doctor of pharmacy and the healthcare system's vaccine coordinator. This one is 95 percent effective, and "tells our bodies to make a partial spike protein, the little red spikes you see all over COVID. Your body recognizes that, and fights it off."

"Although the timeline was very rapid," said Dr. Curtis Donskey, an infectious disease specialist and chair of the hospital's Infection Control Committee, "all of the usual safety measures were in place. This was just like any other clinical trial. They had data from 30,000 participants by the end."

In fact, while previous vaccine trials may have lasted longer, they've had fewer participants, said Tim Heimann, a doctor of pharmacy who serves as assistant director of the hospital's Community Outpatient and Pharmacy services. "If you look at vaccine studies, that first month is when 99 percent of the long-term negative effects happen. We are way beyond that."

Most of the reactions are mild, said Carroll, injection-site discomfort, and occasionally fevers after the second dose. "That's your body's immune response."

The VA began vaccinating staff members Dec. 16, immediately followed by long-term care residents.

"There were lots of tears of joy," from exhausted health care workers, said Heimann.

Outpatient Veterans 75 and older became eligible for vaccine appointments after the first of the year, and the hospital plans to vaccinate 100,000 Veterans over six months. It's challenging, said Heimann and Carroll: Guidelines are ever changing. No one wants elderly Veterans to stand in line for hours. Patients must wait 15 minutes after receiving vaccines, and they require enough room to socially distance. Then, everyone must return for round two.

It's "a daunting task," but it's worth it, said Heimann. "If you get a vaccine, you're not going to be sick enough to be in the hospital. Every day, we're giving 300, 400 or 500 vaccines," and that number is expected to reach at least 1,200 a day. "By the end of the day, you made a difference."

"I've never seen anything so well run," said Dr. Sarah Augustine, associate chief of Medicine Service. It's "phenomenal."

The vaccines themselves require special handling. They must be stored at -70 F, but the hospital already had a special freezer from the trial. VA managed to track down two more, as well as several battery-powered refrigerators and freezers.

"There's only two sites in our region that can house the Pfizer [vaccine]," Carroll noted. "Everybody else is splitting the allotments of Moderna. This gives us a lot more vaccines so we're able to take care of more people in a rapid manner. It's good for five days once it's refrigerated. We receive it here in Cleveland and we ship it down to Akron twice a week, and we're able to take care of Veterans in that area. We'll be doing the same in Youngstown, and hopefully at some other sites too in the future."

The team was initially short vaccinators, so nurses and doctors volunteered to help give injections.

"Normally, docs don't give vaccines," said Augustine. "People literally cry when they go down to that clinic. It is one of the few positive things we've had in a long time to combat this disease."

"Just to see the lobby full of socially distant Vets waiting for their vaccines – I've had Vets cry when I gave it to them. I've had Vets pull out their vaccination card from when they were vaccinated for polio. The things you hear in this clinic are just unbelievable. That has been very inspiring for a lot of staff."

Fidelis Uzomah, a nurse in the medical center's long term care wing, was inspired as well. He was one of the first employees to receive the vaccine in December. It was his duty to protect both his patients at work and his family at home, he said. He even convinced several coworkers and residents to get their own shots.

"I see the vaccine like a shield armor that can help me protect my patients," he said. "They need me here. If I'm sick at home, I'm not taking care of them."

Still, "the vaccine is not an immediate solution," Heimann cautioned. It takes time to develop an immune response, and no one knows if recipients can still transmit the virus. "Two years from now, we'll know that answer. You'll see us masking for quite a while."



2020 YEAR OF THE NURSE

Excel. Lead. Innovate.

The World Health Assembly (WHO) designated 2020 the International Year of the Nurse and Midwife in Honor of Florence Nightingale's 200th birthday. Ms. Nightingale was a visionary nurse, leader and innovator. Her work continues to influence and guide the nursing profession today.

VA Northeast Ohio is honored to join nurses all over the world in this celebration. In partnership with the WHO,

the American Nurses Association (ANA), and many national professional nursing organizations, VA is celebrating and honoring nursing professionals across the continuum.

VANEOMS is part of a community of nurses dedicated to Veteran centered health care, sharing successes of academic excellence, scientific contributions, quality of care delivery, and the compassion provided by our outstanding Veterans Health Administration nursing workforce.



WELCOMING SECVA

Honorable Robert Wilkie, former Secretary of Veterans Affairs.



August 11, 2020 VANEOMS welcomed The Honorable Robert Wilkie, Secretary of Veterans Affairs, for his second visit to Cleveland. While here, Secretary Wilkie went through the typical employee and patient experience, seeing our thermal screeners in use and reviewing visitor restrictions. He met with executive leadership and subject matter experts from our COVID-19 Incident Command to learn about VANEOMS's initial and continuing response efforts. The discussion highlighted the importance of our relationships, resources, research and planning as it relates to VA's success now and into the future, to include the important role these relationships played in allowing VANEOMS to have testing capabilities early on during the pandemic.

The Secretary took an opportunity during his visit to honor several employees as representatives of the greater impact our team has had during the pandemic, and he learned about our extensive 3D printing operation. He also got to learn more about our team's national and international involvement in research related to vaccine trials, treatment and prevention guidelines, and contact tracing.

Secretary Wilkie concluded his trip to Cleveland by writing a special message to the VANEOMS team saying "To the staff of Stokes on the frontlines for America! Thank you on behalf of a grateful Nation!, Robert Wilkie, Secretary."



A TRADITION OF EXCELLENCE

VANEOHS celebrates 80 years.

November 2020 marked 80 years of health care for Veterans in Northeast Ohio. Focusing on our commitment and dedication to putting the nation's heroes first, this anniversary highlights our contributions to Northeast Ohio as both a healthcare provider and employer of choice. Dedicated health care for Veterans came to the area after authorization in 1938 from President Franklin Roosevelt's New Deal. The Works Progress Administration (WPA) allocated \$1,090,000 for the new hospital that brought 150 jobs with it. Today, VANEOHS's comprehensive healthcare system has 18 locations, an annual operating budget of more than \$1.2 billion, and more than 5,300 employees across a 21-county catchment area.

VA's presence in Northeast Ohio has grown from the 278-bed tuberculosis hospital in Broadview Heights to one of

the largest healthcare systems in the Department of Veterans Affairs. Over the years, VANEOHS's tradition of excellence has put a priority on quality care, research and education. We've adapted to meet the changing needs of America's heroes and we support Veterans' inherently unique healthcare needs in a way that caters to their military service and transition to civilian life. Our desire for excellence when it comes to quality and satisfaction for Veterans and employees is a testament to our dedication to our mission of serving those who served.

We've learned a lot in the last 80 years and plan to continue using our Veteran expertise to provide care befitting of Veterans' service to our nation. VANEOHS's 80th Anniversary provides an opportunity to be proud of all that the healthcare system has accomplished and look to the future to continue to surpass expectations.



1940 BRECKSVILLE VA HOSPITAL (BROADVIEW HEIGHTS)

The new hospital opened in 1940 in Broadview Heights Village, known as the Brecksville Veterans Administration Hospital. It was located at the site of the current Broadview Heights Recreation Center. The majority of the 278 beds were used for tuberculosis treatment, a common ailment of World War II. The hospital closed in 1965 and patients were moved to the newer Brecksville VA Hospital in Brecksville.



1946 CRILE VETERAN HOSPITAL

VA took over the Army's Crile Hospital in Parma Heights, what is now home to Tri-C's Western Campus. The Crile Veterans Hospital had 1,000 beds and provided for clinical study, teaching, physical therapy, occupational therapy and corrective therapy for Veterans after WWII. The hospital closed in 1964, relocating patients to the new Louis Stokes Cleveland VA Medical Center.



1961 BRECKSVILLE VA HOSPITAL

When it opened in 1961, the Brecksville VA Hospital had 999 beds and a staff of 950. The campus had a swimming pool, gymnasium, and bowling alley for Veterans to enjoy. In the first year, the Brecksville VA admitted 944 patients and discharged 260. In the late 1960s and early 70s, the hospital introduced treatment for compulsive gamblers, a rehabilitation program for alcoholics and a Drug Abuse Center all linked to combat related stress. They were also recognized nationally for assisting Veterans with finding employment.



1971 VA FACILITY MERGER

VA's hospitals in Northeast Ohio merged in 1971, bringing together the Cleveland VA and Brecksville VA Hospitals to enhance Veteran care under one umbrella organization. Through this merger, the VA was able to provide and develop the full spectrum of primary, secondary, and tertiary for medical, surgical, and mental health wellness.



2011 BRECKSVILLE VA CLOSURE

In 2011, all long-term, medical, surgical and specialty care services were moved to the Cleveland VA medical Center and VA closed the Brecksville facility after nearly 50 years of serving Northeast Ohio Veterans. This consolidation of facilities brought a new long-term care unit to Cleveland (CARES Tower). A new administration building and employee parking garage also resulted from the consolidation. Outpatient services were moved to the new Parma VA Outpatient Clinic which became VANEOLS's 13th VA Outpatient Clinic.



FISHER HOUSE

Home away from home.



The Cleveland VA Fisher House is a “home away from home” for families of military and Veterans receiving care from the Cleveland VA Medical Center and area hospitals. The two, 16-suite homes, provide free, temporary lodging so military and Veteran families who live at least 50 miles or further from the treating facility can be close to their hospitalized loved one during a medical crisis.

The Fisher Houses provide a comforting, first-class experience while their loved one is receiving care in an unfamiliar environment. This special support relieves the stress of locating a place to stay in an unfamiliar city so the family can focus on supporting their loved one.

All the comforts of home are provided to allow families to retreat and rejuvenate after a stressful day at the hospital. While the road to recovery is different for every family, one thing remains the same, the Cleveland VA Fisher House is there to provide comfort and compassion.

The Fisher House program was established in 1990 by Zachary and Elizabeth Fisher to provide free, temporary lodging to military families, allowing them to be close to their loved one during a medical crisis and focus on what’s important – the healing process.

More than 1,000 local Cleveland donors including community organizations, Veteran Service Organizations, charitable foundations and individuals combined with national donors over nearly 10 years to raise \$3.4 million. Fisher House Foundation constructed and gifted the houses to the U.S. Department of Veterans Affairs to support the need in Northeast Ohio. With the support and land donation from the City of Cleveland and the Cuyahoga Land Bank, the official Land Transfer Ceremony took place June 30, 2017, the first step in beginning construction.

The groundbreaking ceremony took place March 23, 2018, and the Cleveland VA Fisher House opened its doors to its first guest June 10, 2019.



How Can I Help?

By contributing to the Cleveland VA Fisher House, you can make a difference in the lives of America’s service members, retirees, Veterans, and their families when they need help the most. Our Fisher House depends on public donations to continue our important work.

For more information on ways you can donate or help, contact Fisher House staff at **216-707-4800**. Financial contributions can be dropped off at Voluntary Service or at the Fisher House with the Fisher House staff. For media inquiries, contact VA Northeast Ohio Healthcare System Public Affairs at **216-791-3800 ext. 63012**.

ENROLLMENT

VA Eligibility.

Access to VA benefits and services depends on a Veteran's eligibility. Eligibility is determined using different factors depending on the benefit. While a lot of information is used to determine a Veteran's eligibility for benefits, one critical factor may be a Veteran's disability rating.

What is Eligibility?

VA uses "eligibility" to describe the benefits and services Veterans can access. Each benefit they are trying to access may require a different set of eligibility factors. For example, a Veteran may be eligible for the GI Bill but not for VA Health Care. If a Veteran is interested in a certain benefit, it is best to work with VA to determine eligibility.

FACTORS OF ELIBILITY

Disability Rating

Service History

Medical Need

Income Level

TYPES OF BENEFITS

Employment



Education



Finance



Health Care



Housing



Memorialization



Apply Online

Fill out the application online and submit it to VA for processing. No need for additional documents to verify military service.

Veterans will immediately receive a confirmation message notifying them that their application was received.

www.va.gov/health-care/apply/application/

By Telephone

The phone application option eliminates the need for a signed paper application. VA staff members will collect necessary information and process the enrollment application for eligibility determination.

877-222-VETS (8387) 8 a.m.-8 p.m. EST, M-F

Apply In Person

Veterans may apply in person at any local VA medical center or outpatient clinic. Locations, addresses and contact numbers are listed on the back cover.

By Mail or Email

Veterans can pick up an application at their local VA or download, print, and fill out the 10-10EZ (Application for Health Benefits).

Cleveland VA Medical Center

ATTN: 541-135W

10701 East Boulevard

Cleveland, Ohio 44106-9918

ENROLLVANE0@va.gov

www.va.gov/vaforms/medical/pdf/10-10EZ-fillable.pdf

RESOURCES

Veterans Benefits Administration

Uniformed service members; Veterans; or spouses, children, or parents of a deceased or disabled service member or Veteran may be eligible for VA benefits. Possible benefits include compensation, education, health care, home loans, insurance, pensions, vocational rehabilitation and employment, and burial and memorial benefits for which you are eligible.

Go to eBenefits at www.ebenefits.va.gov, a one-stop shop to apply for and learn about VA benefits. Or visit the nearest VA Regional Office, call **800-827-1000**, or go to our website at www.va.gov/benefits for more information.

Ohio Vet Centers

Readjustment Counseling Services

Helping Veterans and their families make the transition between military and civilian life. Services are FREE to all eligible Veterans and their families.

Services offered include: Individual, group and family counseling, community education, and VA information and referrals. No information will be communicated to any person or agency, without written consent from the Veteran, except in circumstances to avert a crisis. (HIPAA, 1996)
24/7 HOTLINE: **1-877-WAR-VETS (927-8387)**

MAPLE HEIGHTS: **(216) 707-7901**

STARK COUNTY: **(330) 454-3120**

PARMA: **(440) 845-5023**

National Cemetery Administration

Burial in a VA national cemetery is open to all members of the armed forces and Veterans who have met minimum active duty service requirements, as applicable, and were discharged under conditions other than dishonorable. A Veteran's spouse, widow or widower, minor children, and, under certain conditions, unmarried adult children with disabilities, may also be eligible for burial. Eligible spouses and children may be buried even if they predecease the Veteran. VA provides the gravesite, grave liner, opening and closing of the grave, government headstone or marker, U.S. burial flag, Presidential Memorial Certificate and perpetual care of the gravesite at no cost to the family.

Information on VA burial benefits is available from local VA national cemetery offices, at www.cem.va.gov, or by calling VA regional offices toll-free at **800-827-1000**. To make burial arrangements at any open VA national cemetery at the time of need, call the National Cemetery Scheduling Office at **800-535-1117**.

Ohio Western Reserve National Cemetery

The second national cemetery built in Ohio and the 119th in the national cemetery system. The cemetery is approximately 45 miles south of Cleveland in Medina County.

10175 Rawiga Road, Seville, OH 44273
330-335-3069



AWARDS + ACCREDITATIONS

EXTERNAL DESIGNATIONS

**ALS Association – Certified
Treatment Center of Excellence**

**American Association of Diabetes
Educators – Outpatient Diabetes
Self-Management Education
Program**

**Association for Assessment +
Accreditation of Laboratory Animal
Care International (AAALAC) –
Research Laboratory**

**American Association of Critical-
Care Nurses’ Beacon Award for
Excellence**

Medical Intensive Care Unit – Silver
(2021)

Progressive Care Unit – Bronze (2021)

Surgical Intensive Care Unit –
Silver (2023)

**American College of Surgeons –
Commission on Cancer Accredited
Center**

American College of Radiology
Oncology (12/18 – 12/21)
Radiation Oncology (7/18 – 7/21)
Ultrasound (5/20 – 5/23)
PET / CT (8/20 – 12/21)
Mammography (9/23)

**American College of Emergency
Physicians – Level 1 Geriatric
Emergency Department**

**American Heart Association – Get
With the Guidelines Heart Failure
Gold Plus with Target: Type 2
Diabetes Honor Roll Achievement
Award Hospital (2020)**

**Anticoagulation Forum
Centers of Excellence
Certification –
Anticoagulation Clinic (2022)**

**Better Health Partnership –
Gold Star Practices
COMISS Network Commission
for Accreditation of Pastoral
Services (2025)**

**College of American Pathology
(CAP) – Pathology +
Laboratory Medicine Services**

**Forum for Shared Governance
Accreditation**

ACCREDITATIONS

Joint Commission Accreditation

Hospital Accreditation Program

Behavioral Health

Home Health Care

Methadone Treatment Program

Advanced Inpatient Diabetes
Certification

**Commission on Accreditation of
Rehabilitation Facilities (CARF)**

Comprehensive Integrated
Inpatient Rehabilitation Program

Amputee Specialty Program

Spinal Cord Injury Service

Behavioral Health Programs

Employment + Community
Services

Blind Rehabilitation

Intensive Outpatient Pain Program

American Board for Certification

Orthotic + Prosthetic Lab

US DEPARTMENT OF VETERANS AFFAIRS DESIGNATIONS

**Geriatric Research Education +
Clinical Center**

**Headache Disorders Center of
Excellence**

**HIV Specialty Telehealth Access
Resource (H-STAR) Center**

Innovators Network Field Site

Interior Designer of the Year (2020)

**Multiple Sclerosis – Regional
Program**

**Parkinson's Disease Research
Education + Clinical Center**

**Peer Support Specialist of the
Year (2020)**

**Primary Care Education Center
of Excellence**

**Translational Education +
Mentoring Center (VA-TEAM)**

**Rehabilitation Research +
Development Service**

Advanced Platform Technology (APT)
Center

Cleveland Functional Electrical
Stimulation (FES) Center

**SimLEARN Certified Center –
Advanced: Cleveland VA Simulation
Center (2018 – 2020)**

**Veteran Canteen Service – Best
Canteen (2019)**

RESIDENCY PROGRAMS

**American Psychological Association
– Post Doctoral Residency (11/19-
11/29)**

Clinical Psychology

Clinical Health Psychology

Neuropsychology

Rehabilitation Psychology

**Clinical Pastoral Education
Level I/II + Certified Educator
– Association of Clinical
Pastoral Education**

**Commission on Dental
Accreditation – General
Practice Residency (2015-2022)**

**Psychiatry Nurse Practitioner
Residency Program – VA Office
of Academic Affiliation**

**RN Transition-to-Practice
(RNTTP) – VA Office of Nursing
Service**

**Dietetic Internship –
Accreditation Council for
Education in Nutrition
+ Dietetics - Academy of
Nutrition + Dietetics (6/28)**

**American Board of Physical Therapy
Residency + Fellowship Education**

Orthopedic Physical Therapy
Residency

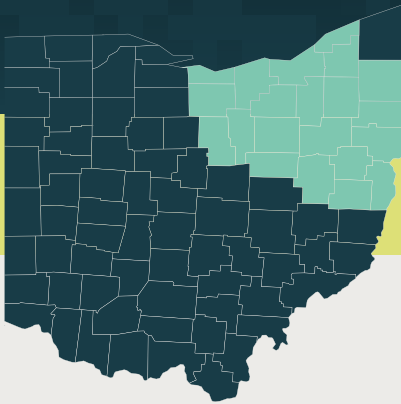
Geriatric Physical Therapy Residency





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WWW.CLEVELAND.VA.GOV



LOCATIONS OF CARE

AKRON COMMUNITY RESOURCE + REFERRAL CENTER

111 E Voris St, Akron, OH 44311
330-761-7054

AKRON VA CLINIC

55 W Waterloo Rd, Akron, OH 44319
330-724-7715

CANTON VA CLINIC

733 Market Ave, Canton, OH 44702
330-489-4600

CARL NUNZIATO VA CLINIC

1815 Belmont Ave, Youngstown, OH 44505
330-740-9200

CLEVELAND COMMUNITY RESOURCE + REFERRAL CENTER

7000 Euclid Ave, 2nd floor, Suite 202, Cleveland, Ohio 44103
216-391-0264 Ext. 7772 or 2001

EAST LIVERPOOL VA CLINIC

15655 St Rt 170, Suite A, Calcutta, OH 43920
330-386-4303

LAKE COUNTY VA CLINIC

35000 Kaiser Ct, Willoughby, OH 44094
440-269-4600

LORAIN COUNTY VA CLINIC

5255 N Abbe Rd, Sheffield Village, OH 44035
440-934-9158

LOUIS STOKES CLEVELAND VA MEDICAL CENTER

10701 East Blvd, Cleveland, OH 44106
216-791-3800

MANSFIELD VA CLINIC

1025 South Trimble Rd, Mansfield, OH 44906
419-529-4602

MIDTOWN DIALYSIS CENTER

7000 Euclid Ave, Cleveland, OH 44103
216-391-0274

NEW PHILADELPHIA VA CLINIC

1260 Monroe Ave, Suite 1A, New Philadelphia, OH 44663
330-602-5339

OUTPATIENT SURGERY CENTER

8901 Superior Ave, Cleveland, OH 44106
216-421-3133

PARMA VA CLINIC

8787 Brookpark Rd, Parma, OH 44129
216-739-7000

RAVENNA VA CLINIC

6751 N Chestnut St, Ravenna, OH 44266
330-296-3641

SANDUSKY VA CLINIC

Firelands Regional Medical Center South Campus
1912 Hayes Ave, Sandusky, OH 44870
419-609-1460

WARREN VA CLINIC

1460 Tod Ave NW, Warren, OH 44485
330-392-0311